

## 2700 INTERNAL TRANSFER REQUEST FOR S.N. \_\_\_\_\_

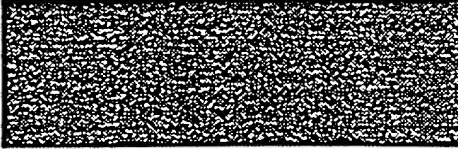
DATE: <u>05/16/02</u>	FROM: <u>Ths Humphreys</u> <del>STEPHENS HONG</del> / (print name) <u>PRIMARY EXAMINER</u> / <u>2776</u>
FORWARD TO: A. Art Unit: <u>2621</u> B. Class: <u>382</u> C Subclass: <u>189</u>	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input checked="" type="checkbox"/> (check box) C. See Abstract <input checked="" type="checkbox"/> (check box) D. See Claim(s): <input checked="" type="checkbox"/>

## FURTHER EXPLANATION IF NEEDED:

image analysis - stroke analysis

DATE: _____	FROM: _____ (print name)
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____

## FURTHER EXPLANATION IF NEEDED:

DATE: _____	FROM: _____ (print name)
FORWARD TO CLASSIFIER 	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____

## FURTHER EXPLANATION IF NEEDED:

## DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	CLASSIFIER: _____
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____

## FURTHER EXPLANATION IF NEEDED: